FEC FORM 3

Only

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2013 JAN 18 AM 8: 40 Office Use Only

(Revised 02/2003)

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typin er the lines.	g, type	LU MAIL 12FE4M5	CENTER Description
P.	O L I T I C A L .	11111	A C	K, E, E, , F	. O. A. D.		
AQ	Check if different than previously reported. (ACC)	T ₁ A ₁ L ₁ L ₁ A ₁ H				F _L	3, 2, 3, 0, 8 -
2.	FEC IDENTIFICATION NO		CITY A 3. IS THIS REPORT	NEW (N)	, [AMENE (A)	ZIP CODE STATE ▼ DISTRICT
4.	TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-Er	Report (Q1) Report (Q2) rly Report (Q3)	Election on	Primary (12P Convention () [] [] (12C) []	General (
	Termination Report		Election on	T-Election Rep	; -	Runoff (30	
5.	Covering Period	M / D D / Y 2	V Y Y Y Y Y O 1 1 , 2	through	M M 1 1	/ D D /	2 0 1 2
Тур	ertify that I have examined the or Print Name of Treasure		_	owledge and		ate Correct and	d complete.
NO	Office Use	eous, or incomplete i	nformation may	subject the per	son signing t	nis Report to t	the penalties of 2 U.S.C. §437g.

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SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

		or Type Committee Name		
R	eport	Covering the Period: From: 1	0 0 1 2 0 1 7	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	5.00	5.00
	(b)	Total Contribution Refunds (from Line 20(d))	0	0
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5.00	5.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (frem Line 17)		
	(b)	Total Offsets to Operating Expenditures (from Line 14)		
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0	0
8.		ch on Hand at Close of corting Period (from Line 27)		
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)		
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)		

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

1	DETAILED SUMMARY PAGE	
FEC Form 3 (Revised 12/2003)	of Receipts	Page 3
Write or Type Committee Name		
Political Super Pac		* ************************************
Report Covering the Period: From:	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	o: 1 1 / 2 6 / 2 0 1 2
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM	л:	
(a) Individuals/Persons Other Than		
Political Committees		5.00
(i) Itemized (use Schedule A)		(5.00)
(ii) Uniternized	0	<u>!</u>
(iii) TOTAL of contributions		
from individuals	() () () () () () () () () ()	5,00
(L) Dellies Deuts Organithese	, , , , , , , , , , , , , , , , , , , 	o paragrangungungungungungan, a gang ang ang an O
(b) Political Party Committees (c) Other Political Committees		
(such as PACs)	0	0
,		
(d) The Candidate	<u> </u>	
(e) TOTAL CONTRIBUTIONS (other than loans)		i programa pomenta de la composició de la c
(add Lines 11(a)(iii), (b), (c), and (d))	0	5.00
		<u> </u>
12. TRANSFERS FROM OTHER		
AUTHORIZED COMMITTEES	<u> </u>	
13. LOANS:		
(a) Made or Guaranteed by the	in alle designe design demikrations alle de	्रीत क्रम्पन्तस्य न्याका स्थापन्तस्य स्थापन् । स्थापन
Candidate	0	- European de de antique de la company de la
(b) All Other Loans		50.00
(c) TOTAL LOANS		
(add Lines 13(a) and (b))	0	50.00
14. OFFSETS TO OPERATING		
EXPENDITURES		
(Refunds, Rebates, etc.)	0	
15 07 17 07 07 07 07 07 07 07 07 07 07 07 07 07		
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
	[<u>rnnnn</u>]	<u> </u>
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)		
(Carry Total to Line 24, page 4)	0 ·	55.00

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3 (Revised 02/2003) Page 4 **COLUMN A** COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0 0 by the Candidate..... 0 0 (b) Of All Other Loans **TOTAL LOAN REPAYMENTS** (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees..... 0 (b) Political Party Committees..... (c) Other Political Committees 0 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0 (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS Piryx fee 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	0.00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	55.00
25. SUBTOTAL (add Line 23 and Line 24)	55.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	54.77

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the 11a 11b 11c

OF

ITEMIZED RECEIPTS **Detailed Summary Page** 12 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) olitical Super Pac Full Name (Last, First, Middle Initial) OCHOA, DANIELLE Date of Receipt Mailing Address 715 MICCOSUKEE RD State Zip Code City TALLAHASSEE, FL 32308 0 0 5 2 0 7 1 8 FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation **OWNER LEGIS** Receipt For: Election Cycle-to-Date **Primary** x General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address MTM / [DT DT] / TYTYTYT City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: **Election Cycle-to-Date Primary** General Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) (check for each category of the Detailed Summary Page

LINE NUMBER:		ER:	AGE	OF
ck only one)				
	17	18	19a	198
	20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Political Super Pac

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

	· · · · · · · · · · · · · · · · · · ·			
Full Name (Last, F	rst, Middle Initial)		Data of Distriction	
\.]	Date of Disbursement	
Mailing Address			MIN MI / DOD' / YEVYEYE	
Mailing Address			Rangedi Carani Yaanamaan I	
City	State Zip Code		Amount of Each Disbursement this Period	
Purpose of Disburs	ement		E-Marina Radio Residente de Caracteria de Ca	
Candidate Name		Category/ Type		
Office Sought:	House Disbursement For: Senate Primary General Other (specify) District:			
Full Name (Last, F				
3.			Date of Disbursement	
Mailing Address			Lad Lad Basala	
City	State Zip Code		Amount of Each Disbursement this Period	
D		na gasagasa p	ped and and and area and a company of an	
Purpose of Disbur	sement :			
Candidate Name Category/				
Office Sought:	House Disbursement For: Senate Primary General Other (specify) District:			
Full Name (Last, F	rst, Middle Initial)			
) .			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y Y	
City	State Zip Code		Amount of Each Disbursement this Period	
Purpose of Disburs	sement	ili. Santario de la composició		
Candidate Name				
Office Sought: State:	House Disbursement For: Senate Primary General President Other (specify) District:			
SUBTOTAL of Disbu	rsements This Page (optional)			
TOTAL This Period (last page this line number only)			

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SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE OF FOR LINE NUMBER: (check only one) 13a 13b
NAME OF COMMITTEE (In Full) Political Super Pac			
Choa, Danielle Mailing Address 715 Miccosukee RD City	dle Initial) State ZIP Cod		ction: Primary General Other (specify) ▼
Tallahassee, FL 32308 Original Amount of Loan 50.00	Cumulative Payment To I		Outstanding at Close of This Period
Date Incurred M M / D / Y Y Y Y Y Y Y Y Y		Interest Rate O 1 3	Secured: O (apr) Yes No
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	b Loan Source	Name of Employer	
Mailing Address		Occupation Amount	
City State 2. Full Name (Last, First, Middle Initial)	ZIP Code	Guaranteed	л_ <u>т_</u>
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	·
City State	ZIP Code	Guaranteed	<u></u>
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)	— ► <u>— — — — — — — — — — — — — — — — — —</u>	50.00 50.00

SC	HEDULE D (FEC Form 3)	(Use separate	PAGE OF FOR LINE NUMBER:			
	BTS AND OBLIGATIONS	schedule(s)				
	cluding Loans	for each numbered line)	(check only one)	9		
_	ME OF COMMITTEE (In Full)			<u> </u>		
	Political Super Pac					
	A. Full Name (Last, First, Middle Initial) of Deb	otor or Creditor	Nature of D	Debt (Purpose):		
	Mailing Address					
	O'h	7:- 0:-1:-				
	City State	Zip Code				
	Outstanding Balance Beginning This Period					
	Amount Incurred This Period	Payment This Period	Outstandi	ing Balance at Close of Thi	e Period	
	Amount Incurred This Period	Layment this renod		Outstanding Balance at Close of This Period		
		<u> </u>	r <u></u>		لخصد	
	B. Full Name (Last, First, Middle Initial) of Debt	tor or Creditor	Nature of D	Debt (Purpose):		
ı						
	Mailing Address					
ı		······				
	City State	Zip Code				
	Outstanding Balance Beginning This Period	The state of the s				
	Outstanding Balance Beginning This Period					
ı	1 3 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		_			
ı	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of Thi	s Period	
		 	11 11		.:	
	C. Full Name (Last, First, Middle Initial) of Del			Debt (Purpose):		
,	o. Tan Name (cast, Thot, Island) initial, or both		Nature of L	Sebt (i dipuse).		
	Mailing Address					
	Waling Address					
	City	State Zip Code				
	Outstanding Balance Beginning This Period					
	l Barren or narangera in 🙉 alah B					
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of Th	s Period	
			# #			
	Control Carpanette (Samuel Area de montagador alternado de Carlos	Complete to the Carlot of the		h. 1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
۵.	CURTOTAL C This Posted This Poste 4 4 4 1				• •	
1)	2) TOTALS This Period (last page this line number only) Page (optional)				HRY	
2)						
_	I A IUPA I IIIO I GIIOU (IGSI Page IIIIS IIIIG IIUIIII	Jer Orlly)				
31	TOTAL OUTSTANDING LOANS from Schedu			50.		

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)